

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

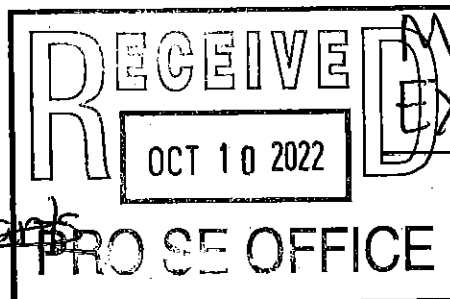
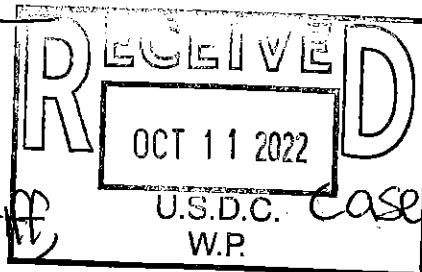
MALIK L. BROWN,

- against -

STEPHEN URBANSKI;

Defendants

Plaintiff



Motion To
EXCLUDE Documents

Please ~~Take Notice~~ that pursuant to Rule 26(f)(1), and 34 of the Federal Rules of Civil Procedure defendants not only submitted documents without consent from opposing party nor leave of court and such documents are inconsistent with discovery scheduling and plan as well as information plaintiff (MALIK L. BROWN) proposed an offer with reason and the defendants (URBANSKI, Deacon, Del'Bianco) used information from that proposal to create documents after the fact to satisfy opposing argument 24 days later exactly. Discovery has been concluded and nothing but an response to proposed offer should have been giving. I made request 8/3/22 got an response 9/5/22 made an offer 8 days later and got these made up documents. I ask to Bars these new documents which came after my offer.

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

MALIK L. BROWN

- against - Plaintiff,

STEPHEN URBANSKI;

CASE NO. 21-CV-214(S)
PROPOSED SETTLEMENT
OFFER

Defendants,

TO: COUNSEL (ANDREW BLANCHARD) ASSISTANT Attorney Gen.
State of NY please be advised that the plaintiff
(MALIK L. BROWN) proposes an offer and demands
as follows due to ongoing medical complications
physical pain and suffering as well as mental
documented thru daily supplemented medications
plaintiff seek compensatory in the amount of
\$290,000 STEPHEN URBANSKI \$100,000 JOSEPH DEACON
\$100,000 and Mark DeBlanco \$90,000.

There clearly wasn't Service of an order
if so defendants would present the officer
who served this with footage of area date
time place also I have requested the original
order twice and gotten may 28th 2020 as the
original document both times in which isn't
even signed by the superintendent and is
impossible if I was in restraints since
the beginning of may also the footage

15 suggestive out of all of the cameras
operable with the vicinity the only one
evidence is where the actions of
officers on scene cannot be
seen also its been clearly established
thru Admissions of officers that I
was the designated target of the use
of force for said reason plaintiff seeks
punitive in the amount of \$(85,000) STEPHEN
URBANSKI \$50,000 JOSEPH DEACON \$17,500
MARK DELBIANCO \$17,500 for a total of
\$375,000 and I ask that for the privacy of
parties this case cannot be viewed public or built
up by either party if accepted. Note plaintiff
has good faith in prevailing at trial due
to these issues and several more and make
this offer in good faith considering the evidence
extremely in my favor if an settlement cannot
be met I am willing to go to trial and
request the testimony of the so called serving
officers.

M. Brown
Dated: Sept 13th, 2022 MALIK BROWN

CC:FILE//Brown 16/1000 FIVE POINTS CORR. FACILITY
6600 State Rte 96
ROMULUS, NY 14541

EXHIBIT A

This goes with
the Supplemental
Response dated
Sept 26, 2022

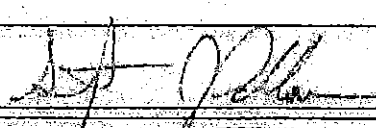
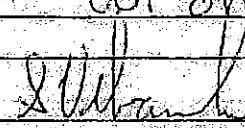
STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

FORM 2186 (7/11)
REF: 7 NYCRR


Fishkill

Correctional Facility

RESTRAINT ORDER

RECOMMENDATION	I recommend that inmate <u>Brown, Malik</u> , DIN # <u>16A1000</u> be placed on a restraint order from <u>5/7/20</u> to <u>5/13/20</u> because of the following reasons: Due to his Violent Conduct history. Has chronic disciplinary history.	
	I recommend <input checked="" type="checkbox"/> do not recommend <input type="checkbox"/> that this inmate be required to remain in restraints in the exercise area in accordance with 7 NYCRR 305.4(e)(5). (If recommended, state reasons.) Due to the COVID-19 pandemic our SHU-200 is being occupied by Positive tested Inmates, Inmate Brown is a SHU Inmate being housed on a Keep Lock unit	
	 , Sergeant Date <u>5-7-20</u>	
	Restraint Order Approved <input checked="" type="checkbox"/> Disapproved <input type="checkbox"/> Restraints in exercise area Approved <input checked="" type="checkbox"/> Disapproved <input type="checkbox"/>	
INITIAL AUTHORIZATION	Reason for approval / disapproval: <u>Inmate was involved in an incident of violent conduct while housed in K/L. As a result of this incident inmate received 120 days SHU. Due to COVID-19 crisis inmate is being housed in K/L and poses a threat to security.</u>	
	Type(s) of restraints to be used / manner of application: <u>out of cell hand cuffs / waist chain during cell</u>	
	 , Deputy Superintendent Date: <u>5/7/20</u> for Security Services	
	*NOTE: A determination that you are required to remain in restraints in the exercise area will expire three days after the date of this authorization unless approved below by the Superintendent or Acting Superintendent.	

NOTICE TO INMATE: You may write to the Deputy Superintendent for Security or his/her designee to make a statement as to the need for continuing this restraint order.

SUPERINTENDENT REVIEW	Pursuant to 7 NYCRR 305.4 (e)(5), I have reviewed the relevant facts pertaining to the order that you will remain in restraints in the exercise area. I have approved <input checked="" type="checkbox"/> disapproved <input type="checkbox"/> the determination that you remain in restraints in the exercise area for the duration of this restraint order for the following reason(s): <u>BT YOUR SHU STATUS REQUIRES ADDITIONAL RESTRAINTS DURING ESCORTS.</u>	
	 , Superintendent Date <u>5/8/2020</u>	

Distribution: White - Superintendent, Canary - DSS, Pink - SHU Sergeant/Housing Unit, Goldenrod - Inmate

this is
FRESHLY
made up

Fishkill

Correctional Facility

Freshly
hand
written

RESTRAINT ORDER RENEWAL

RECOMMENDATION

I recommend that inmate Brown, Malik, DIN # 16A1000 be continued under a restraint order from 5/14/20 to 5/20/20 because of the following reasons:

Due to his Violent Conduct history. Has Chronic disciplinary history

The restraint order was originally authorized from 5/7/2020 to 5/13/2020
 I recommend ☒ do not recommend ☐ that this inmate be required to remain in restraints in the exercise area in accordance with 7 NYCRR 305.4(e)(5). (If recommended, state reasons.)

Due to the Covid-19 pandemic our SHU-200 is being occupied by Positive Tested inmates. Inmate BROWN is a SHU inmate being housed on a Keep Lock unit.

[Signature] K. Johnson, Sergeant Date 5/20/20

RENEWAL AUTHORIZATION

Restraint Order Renewal Approved ☒ Disapproved ☐ Restraints in exercise area Approved ☒ Disapproved ☐

Reason for approval / disapproval:

Inmate was involved in an incident of violent conduct while housed in K/L. As a result of this incident inmate received 100 days SHU. Due to COVID-19 crisis inmate is being housed in K/L and poses a threat to security.

Type(s) of restraints to be used / manner of application:

opt of cell hand cuffs / waist chain during rec.

[Signature] D. V. [unclear], Deputy Superintendent Date 5/14/20
for Security Services

*NOTE: A determination that you are required to remain in restraints in the exercise area will expire three days after the date of this authorization unless approved below by the Superintendent or Acting Superintendent.

NOTICE TO INMATE: You may write to the Deputy Superintendent for Security or his/her designee to make a statement as to the need for continuing this restraint order.

SUPERINTENDENT REVIEW

Pursuant to 7 NYCRR 305.4 (e)(5), I have reviewed the relevant facts pertaining to the order that you will remain in restraints in the exercise area. I have approved ☒ disapproved ☐ the determination that you remain in restraints in the exercise area for the duration of this restraint order for the following reason(s):

YOUR BEHAVIOR POSES A THREAT TO THE SAFE RUNNING ORDER OF THE FACILITY

[Signature], Superintendent Date 5/20/20

FORM 2186 RENEWAL (7/11)
REF: 7 NYCRR 305.4

Fishkill

Correctional Facility

RESTRAINT ORDER RENEWAL

RECOMMENDATION	I recommend that inmate <u>Brown, Malik</u> DIN # <u>16A1000</u> be continued under a restraint order from <u>5/21/20</u> to <u>5/27/20</u> because of the following reasons: Inmate Brown has cronic violent conduct history. Cronic disciplinary history.	
	The restraint order was originally authorized from <u>5/7/2020</u> to <u>5/13/2020</u>	
	I recommend <input checked="" type="checkbox"/> do not recommend <input type="checkbox"/> that this inmate be required to remain in restraints in the exercise area in accordance with 7 NYCRR 305.4(e)(5). (If recommended, state reasons.)	
	Due to the COVID-19 pandemic our SHU-200 is being occupied by Positive tested Inmates, Inmate Brown is a SHU Inmate being housed on a Keep Lock unit.	
RENEWAL AUTHORIZATION	<u>J. Pallone</u> , Sergeant Date <u>5-25-20</u>	
	Restraint Order Renewal Approved <input checked="" type="checkbox"/> Disapproved <input type="checkbox"/>	Restraints in exercise area Approved <input checked="" type="checkbox"/> Disapproved <input type="checkbox"/>
	Reason for approval / disapproval: <u>Inmate was involved in an act of violence while in KL. AS RESULT inmate received 120 days SHU. Due to the COVID-19 CHU inmate is being housed in KL / poses a threat to security</u>	
	Type(s) of restraints to be used / manner of application: <u>out of cell handcuffs / waist chain during recreation</u>	
<u>ADD Washet</u> , Deputy Superintendent for Security Services Date <u>5/26/20</u>		
*NOTE: A determination that you are required to remain in restraints in the exercise area will expire three days after the date of this authorization unless approved below by the Superintendent or Acting Superintendent.		

NOTICE TO INMATE: You may write to the Deputy Superintendent for Security or his/her designee to make a statement as to the need for continuing this restraint order.

SUPERINTENDENT REVIEW	Pursuant to 7 NYCRR 305.4 (e)(5), I have reviewed the relevant facts pertaining to the order that you will remain in restraints in the exercise area. I have approved <input checked="" type="checkbox"/> disapproved <input type="checkbox"/> the determination that you remain in restraints in the exercise area for the duration of this restraint order for the following reason(s): <u>YOU ARE SERVING SHU CONFINEMENT SANCTIONS IN A KEEPLOCK UNIT. YOU HAVE A CRONIC HISTORY OF VIOLENT BEHAVIOR.</u>	
	<u>[Signature]</u> , Superintendent Date <u>5/27/2020</u>	

Distribution: White - Superintendent, Canary - DSS, Pink - SHU Sergeant/Housing Unit, Goldenrod - Inmate

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION
 FORM 2186R RENEWAL (3/17) FISHKILL Correctional Facility
 REF: 7 NYCRR 305.4

RESTRAINT ORDER RENEWAL

RECOMMENDATION	I recommend that inmate <u>Brown, Malik</u> DIN <u>16A1000</u> be continued under a restraint order from <u>05/28/20</u> to <u>06/03/20</u> because of the following reasons: <u>Inmate has a history of violent conduct</u> <u>Inmate has chronic disciplinary history.</u> The restraint order was originally authorized from <u>?</u> to <u>?</u> I recommend <input checked="" type="checkbox"/> do not recommend <input type="checkbox"/> that this inmate be required to remain in restraints in the exercise area in accordance with 7 NYCRR 305.4(e)(5). (If recommended, state reasons.) <u>Due to COVID-19 Pandemic, our SHU 200 is being occupied by positive tested inmates.</u> <u>Inmate Brown is an SHU Inmate being housed on a keep lock unit.</u>
	<u>T. Pearson</u> Sergeant Date <u>5/28/20</u> Restraint Order Renewal Approved <input checked="" type="checkbox"/> Disapproved <input type="checkbox"/> Restraints in exercise area Approved <input checked="" type="checkbox"/> Disapproved <input type="checkbox"/> Reason for approval/disapproval: <u>Inmate was involved in an act of violence while in the SHU. He is a violent inmate and has a history of violence. He is a danger to himself and others.</u> Type(s) of restraints to be used/ manner of application: <u>all of all hand restraints.</u> <u>wait chair during restraints.</u> <u>Malik W.</u> Superintendent Date <u>5/28/20</u> *NOTE: A determination that you are required to remain in restraints in the exercise area will expire three days after the date of this authorization unless approved below by the Superintendent or Acting Superintendent.

NOTICE TO INMATE: You may write to the Deputy Superintendent for Security or his/her designee to make a statement as to the need for continuing this restraint order.

SUPERINTENDENT REVIEW	Pursuant to 7 NYCRR 305.4(e)(5), I have reviewed the relevant facts pertaining to the order that you will remain in restraints in the exercise area. I have approved <input checked="" type="checkbox"/> disapproved <input type="checkbox"/> the determination that you remain in restraints in the exercise area for the duration of this restraint order renewal for the following reason(s): <u>Disciplinary history and confirmation of above comments</u> <u>E. Merriam Asst</u> Superintendent Date <u>06/01/20</u>
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Distribution: White - Supt., Canary - DSS, Pink - SHU Sergeant/Housing Unit, Goldenrod - Inmate

NOT
SUPER
INTENDENT

Five Points

First-CLASS MAIL

FIVE POINTS CORRECTIONAL FACILITY

STATE ROUTE 96, P.O. BOX 119
ROMULUS, NEW YORK 14541

NAME: Mark Brown

DIN: 16A1000

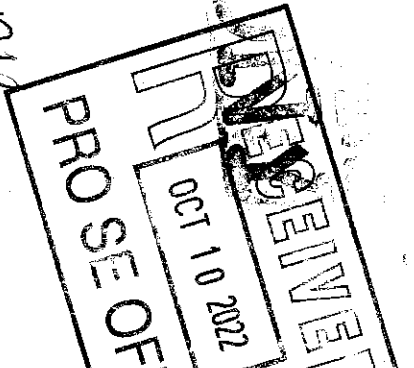
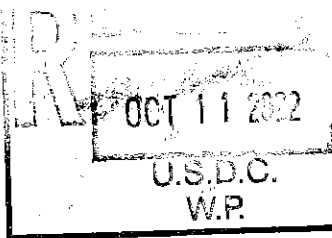
LOC: 11-A2-45

Correctional Facility



ZIP 14541
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neopost[®]
10/04/2022
US POSTAGE \$000.81⁰



LEGAL MAIL
FEDERAL

1050134140 0004

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK
300 PARKROPS STREET
WHITE PLAINS, NY 10601

cc: File/Brown letter